

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF MISSOURI

David Stebbins)
Plaintiff)
)
vs.) Case No. 10-3365-CV-S-RED
)
Reliable Heat & Air, LLC and Randal Richardson)
Defendant)

AFFIDAVIT OF FINANCIAL STATUS

I, David Stebbins, declare that I am the plaintiff in this case, that because of my poverty I am unable to pay the costs of these proceedings, and that I believe I am entitled to relief.

I further swear that the responses which I have made to the questions below and the information I have given relating to my ability to pay the costs of commencing and prosecuting this action are true.

I. MARITAL STATUS AND PERSONAL DATA

- A. Single: X Married:___ Separated:___ Divorced:___
- B. Name of Spouse n/a
- C. Age of plaintiff, petitioner or complainant: 21
- D. Age of spouse: n/a
- E. Address of plaintiff, petitioner or complainant: 1407 N Spring Rd, APT #5, Harrison, AR 72601
Telephone: (870) 204 - 6024
- F. Address of spouse: n/a
Telephone: n/a

G. State name or names of dependents who live with you, their age, address, relationship, and how much of their monthly support you provide:

_____ No dependants. _____

II. EMPLOYMENT

A. Name of employer: _____ unemployed _____
Address of employer: _____
Employer's telephone: _____ Length of employment: _____
Job title or description: _____
Net Income: Monthly \$ _____ Weekly \$ _____
Gross Income: Monthly \$ _____ Weekly \$ _____
Does employer provide health insurance: Yes _____ No _____
If employer provides health insurance, describe coverage: _____

B. Previous employment (Answer only if presently unemployed).
Name of employer: _____
Address of employer: _____
Employer's telephone: _____ Length of employment: _____
Job title or description: _____
Net Income: Monthly \$ _____ Weekly \$ _____
Gross Income: Monthly \$ _____ Weekly \$ _____

C. Employment of spouse:

Name of employer: _____

Address of employer: _____

Employer's telephone: _____ Length of employment: _____

Job title or description: _____

Net Income: Monthly \$ _____ Weekly \$ _____

Gross Income: Monthly \$ _____ Weekly \$ _____

III. FINANCIAL STATUS

(Answer questions on behalf of both the plaintiff, petitioner or complainant and spouse(s)).

A. Owner of real property? Yes ___ No X

If yes - Description: _____

Address: _____

In whose name? _____

Estimated value: _____

Total amount owed: _____

Owed to: _____

Annual income from property: _____

B. Owner of automobile: Yes X No ___

If yes - Number of automobiles owned: _____ one _____

Make Isuzu Model Pickup Year 1990

Make _____ Model _____ Year _____

In whose name registered? David Anthony Stebbins

Present value: _____ Approximately \$1,000.

Amount owed on the automobile(s): _____ none _____

Owed to: _____ nobody _____

Monthly payment(s): _____ \$0.00 _____

C. Cash on hand: (Include checking and savings accounts)

\$ 156.70 _____

List names and addresses of banks and associations:

Please do not state account numbers:

D. Have you received within the past 12 months any money from any of the following sources:

	Yes	No
Rent payments, interest or dividends:	_____	<u>X</u>
Pensions, trust funds, annuities or life insurance payments?	_____	<u>X</u>
Gifts or inheritances?	_____	<u>X</u>
Welfare payments?	_____	<u>X</u>
ADC or other governmental child support?	_____	<u>X</u>
Unemployment benefits?	_____	<u>X</u>
Social Security benefits?	<u>X</u>	_____
Other sources?	_____	<u>X</u>

E. If the answer to any item in D above was "Yes", describe each source of money and state the amount received from each during the past 12 months:

I receive Supplemental Security Income every month in the _____
amount of \$674.00 per month. _____

IV. OBLIGATIONS

- A. Monthly rental on house or apartment: \$375 _____
- B. Monthly mortgage payments on house: n/a _____
Amount of equity in house: _____
- C. Monthly mortgage payments on other properties: \$ _____
Amount of equity in other properties: \$ _____
- D. Household expenses:

Monthly grocery expense: \$150 _____

Monthly utilities:

Gas: _____

Electric: _____

Water: _____

Other: (Specify) \$22 for telephone _____

E. Other debts and miscellaneous monthly expenses:

TO WHOM OWED AND FOR WHAT REASON INCURRED?			MONTHLY PAYMENTS	BALANCE DUE

V. OTHER INFORMATION PERTINENT TO FINANCIAL STATUS
(Include information regarding stocks, bonds, savings bonds, either individually or jointly owned).

I understand that a false statement or answer to any question in this affidavit will subject me to penalties of perjury.

David A. Stelmus _____
Signature of Plaintiff

VERIFICATION

State of _____)
County of _____)

I, being first duly sworn under oath, state that I know the contents of this affidavit and that the information contained in the affidavit is true to the best of my knowledge and belief.

Signature of Plaintiff or Plaintiffs

All parties must verify

SUBSCRIBED AND SWORN TO before me this ____ day of _____, 20 ____

Notary Public

My Commission Expires